

**DECLARATION  
and  
DESIGNATION OF CORRESPONDENCE ADDRESS**

As an inventor named below, I hereby declare that:

My residence, post office address and citizenship are stated below next to my name.

I believe I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought in the specification GP-302820 entitled

**PASSIVE OXYGEN SENSOR DIAGNOSTIC**

I have reviewed and understand the contents of the above-identified specification including the claims, as amended by any amendment referred to in this Declaration.

I acknowledge my duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in title 37 Code of Federal Regulations, Section 1.56.

I further declare that all statements made above of my own knowledge are true, that all statements made above on information and belief are believed to be true, and that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under title 18 United States Code, Section 1001 and may jeopardize the validity of the application or any patent issuing thereon.

Address all communications to

CHRISTOPHER DEVRIES  
General Motors Corporation  
Legal Staff  
Mail Code 482-C23-B21  
P.O. Box 300  
Detroit, MI 48265-3000

Telephone: 313/665-4969

Inventor's signature



Date

5/23/03

Full name :

IGOR ANILOVICH

Citizenship: US

Residence :

WALLED LAKE, MICHIGAN

Post office address :

105 CHESTNUT RIDGE  
WALLED LAKE, MICHIGAN 48390

Inventor's signature

Date

Full name :

THOMAS L. TING

Citizenship: US

Residence :

TROY, MICHIGAN

Post office address :

2568 HOUNDS CHASE DRIVE  
TROY, MICHIGAN 48098

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Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

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Post office address :      **105 CHESTNUT RIDGE**  
   **WALLED LAKE, MICHIGAN 48390**

Citizenship: US

Inventor's signature \_\_\_\_\_

Date 6/3/03

Full name :      **THOMAS L. TING**  
Residence :      **TROY, MICHIGAN**  
Post office address :      **2568 HOUNDS CHASE DRIVE**  
   **TROY, MICHIGAN 48098**

Citizenship: US

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Docket No.: GP-302820

Inventors: IGOR ANILOVICH  
THOMAS L. TING

Title: PASSIVE OXYGEN SENSOR DIAGNOSTIC

**POWER OF ATTORNEY AND  
DESIGNATION OF CORRESPONDENCE ADDRESS**

As an agent of General Motors Corporation, General Motors of Canada Limited, General Motors Japan Ltd., General Motors Strasbourg S.A., and Saturn Corporation, one or more of whom is the assignee of this patent application, I hereby appoint the following attorney employed by General Motors Corporation to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

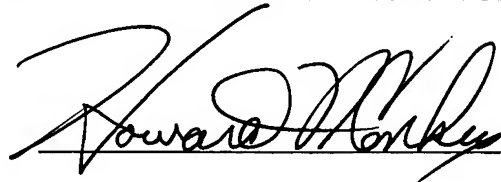
CHRISTOPHER DEVRIES (Reg. No. 44654)

Address all communications to:

CHRISTOPHER DEVRIES  
General Motors Corporation  
Legal Staff  
Mail Code 482-C23-B21  
P.O. Box 300  
Detroit, MI 48265-3000  
Telephone: 313/665-4969

I am authorized to make the above appointment. The assignee's ownership of this patent application is established by the attached assignment documentation, the attached documentation is a true copy of the original documentation, and the original or a true copy of the attached documentation has been or is concurrently being submitted to the Patent and Trademark Office for recording.

By:



Name: Howard N. Conkey Agent

Date: July 22, 2003

**ASSIGNMENT**

Pursuant to an agreement with my employer, I formally assign to GENERAL MOTORS CORPORATION, the entire right, title and interest, in all countries, in the improvements set forth in the United States patent application GP-302820 entitled

**PASSIVE OXYGEN SENSOR DIAGNOSTIC**

for which I executed a declaration dated as indicated below. If the patent application has been filed, I authorize attorney CHRISTOPHER DEVRIES to insert the application number and filing date of said appl when known.

Inventor's signat

**DO NOT RECORD**

Full name :

**DO NOT DETACH FROM  
POWER OF ATTORNEY**

Residence :

Inventor's signatu

Full name :

Declaration dated :

Residence :

TROY, MICHIGAN

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Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Full name : IGOR ANILOVICH Declaration dated :

Residence : WALLED LAKE, MICHIGAN \_\_\_\_\_

Inventor's signature Thomas L. Ting Date 6/3/03

Full name : THOMAS L. TING Declaration dated :

Residence : TROY, MICHIGAN 6/3/03